

Safety Net Network Talking Points  
Senate HHS Subcommittee  
June 7, 2011

- Thanks to the members of the Senate for the opportunity to provide information about the Iowa Collaborative Safety Net Provider Network.
- My name is Kelly Huntsman and I am the Executive Director of Primary Health Care, Inc., a Community Health Center with primary care and dental clinics in Des Moines and Marshalltown. I serve on the Leadership Group of the Safety Net Network and PHC receives a grant award from the Safety Net Network that has allowed us to integrate primary care and behavioral health services in partnership with our local Community Mental Health Center.
- On behalf of the Leadership Group for the Safety Net Network, I want to thank you for restoring \$97,990 to the overall budget of the Network as well as restoring \$68,332 specifically directed to Family Planning Agencies to assist patients in determining an appropriate medical home.
- The Network was established in 2005 by the Iowa Legislature and is a collaborative made up of Free Clinics, Family Planning Agencies, Community Health Centers, Rural Health Clinics, Local Boards of Health, Maternal Child Health Clinics, and other safety net providers.
- The Network makes funding available to a variety of clinics and organizations that serve safety net patients (those at or below 200% of the Federal Poverty Level or under or uninsured). All of the funding distributed by the Network focuses on improving access to affordable pharmaceuticals, improving access to specialty care services, and medical home development and targets individuals who would otherwise lack access to services.
- During SFY10, the following outcomes from Network-funded activities were achieved. Annual data on SFY11 outcomes will be available in July:
  - 88.6% of funding allocated to the Network supported direct services to safety net patients from across the state;
  - The Network provided funding to 134 clinics or grantees;
  - Over 11,813 patients received direct services from nine of the Network's grantees;
  - Over \$5,628,803 in free care was provided by three of the specialty care grantees and the pharmacy initiative grantee: Iowa Prescription Drug Corporation, Linn County Project Access, Polk County Medical Society, Primary Health Care, Inc.
- Data is collected annually by the Network and based on the findings from calendar year 2009, the clinics that make up the Network are serving their intended population:
  - Low income, uninsured, underinsured, and racial and ethnic minorities.
  - The clinics combined provided care for 342,826 people in Iowa accounting for a total of 1,245,353 patient visits.
  - When looking at the Network as a whole, 12% of the patient population belongs to a racial minority and 15% is Hispanic/Latino.
  - Compared to Iowa's 21% combined uninsured and Medicaid population, the Network has a combined uninsured and Medicaid population of 65%.

- Treatment of chronic diseases is also the most common visit type for Network patients. According to the ICD9 code data provided by Community Health Centers, Family Planning Agencies, and Rural Health Clinics and data on level of services requested by Free Clinics, most of these patients are being seen for the treatment of chronic diseases such as hypertension and diabetes.
- The allocation of funding to the Family Planning Agencies helps them to connect patients with a patient centered medical home for continuous, preventive primary care services, is used to assist patients with the costs of medications, and has allowed for investments in health information technology.
- The Safety Net Network recently completed a strategic planning process that will direct the work of the Network for the next three years. The timing of this process was advantageous as the four goals established in the plan are consistent with the goals of a Commonwealth Fund and Wellmark Foundation supported project recently awarded to the University of Iowa Public Policy Center.
- The University of Iowa Public Policy Center was awarded a grant from the Commonwealth Fund to study the impact health care reform will have on the safety net system in Iowa, the results of which will be used as a national model for other states. The Safety Net Network is serving as a key partner in this project where the UI has been able to make use of its existing structure and partnerships to conduct this important analysis. Based on the results of the project as well as the directives in the Network's strategic plan, we hope to test and implement strategies that will support safety net providers such as community utilities to support patient-centered medical homes at the local level.
- In closing, the Network has allowed resources to be directed to safety net providers to test the implementation of patient-centered medical homes models at the local level as well as bring safety net providers together to address common unmet needs on behalf of their patients. These funds have saved the overall health care system in Iowa money by allowing underserved patients access to timely preventive care and medications as well as access to specialty care services that help address their illnesses before they progress into something that would be much more costly to treat.
- I am happy to answer any questions you may have and again appreciate the opportunity to speak with all of you today.